


U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF NINA SHAHIN, CPA	COURT CASE NUMBER Civ. No. 07-643-GMS-LPS
DEFENDANT STATE OF DELAWARE,	TYPE OF PROCESS OC
SERVE  AT	
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN RUTH ANN MINNER, GOVERNOR OF THE STATE OF DELAWARE ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 820 N. FRENCH ST., WILMINGTON, DE 19801, 12th FLOOR	

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

NINA SHAHIN, CPA
103 SHINNECOCK RD.
DOVER, DE 19904

Number of process to be
served with this Form - 285**1**Number of parties to be
served in this case**3**Check for service
on U.S.A.SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All
Telephone Numbers, and Estimated Times Available For Service):

Fold

Fold

PAUPER CASE AND PRO SE REPRESENTATION

Signature of Attorney or other Originator requesting service on behalf of:

N. Shahin☒ PLAINTIFF
☐ DEFENDANTTELEPHONE NUMBER
(302) 678-1805DATE
2/11/2008**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 15	District to Serve No. 15	Signature of Authorized USMS Deputy or Clerk BF	Date 3-7-08
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I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described
on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

JUDITH O'Brien Sec'y To The Governor

Address (complete only if different than shown above)

☐ A person of suitable age and dis-
cretion then residing in the defendant's
usual place of abode.

Date of Service Time am

3-25-08 3:40 pm

Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

2008 APR -1 AM 8:43
FILED
CLERK, U.S. DISTRICT COURT
DISTRICT OF DELAWARE